



NEW YORK UNIVERSITY
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Student Handbook
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Postdoctoral Program in Psychotherapy and Psychoanalysis

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**CANDIDATES ARE EXPECTED TO BE FAMILIAR WITH THE REQUIREMENTS
AND POLICIES OF THE POSTDOCTORAL PROGRAM AND OF THE
NYU GRADUATE SCHOOL OF ARTS & SCIENCE.**

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INTRODUCTION

This is the Student Handbook of the New York University Postdoctoral Program in Psychotherapy and Psychoanalysis (“Postdoc”). All Postdoc students are required to be familiar with the policies and procedures of the Program and of NYU’s Graduate School of Arts and Science. This manual serves as a guide through those regulations. Please note that the term “candidate” is typically used in psychoanalytic training programs and will be used here as synonymous with the term “student.”

The New York University Postdoctoral Program in Psychotherapy and Psychoanalysis values psychoanalytic pluralism, ongoing dialogue among the various psychoanalytic traditions, and respect for the candidate in analytic training as a dedicated professional, competent clinician, and scholar. We have always believed that the best setting in which to pursue psychoanalytic education incorporating our values is at a university with an established tradition of intellectual inquiry, freedom of thought, interdisciplinary exchange, and a commitment to research.

Our Postdoctoral Psychoanalytic Program offers a diverse curriculum including Contemporary Freudian, Interpersonal, Relational, and Independent orientations, and it is unique in offering comprehensive education in each of these approaches. Candidates in psychoanalytic training are encouraged to sample courses and work with clinical consultants from each of the orientations, although they are also free to concentrate on any one of them. Each orientation features an internationally known teaching faculty and outstanding clinical consultants who have made significant contributions to the field of psychoanalysis. The Postdoctoral Program was the first psychoanalytic training program to be fully accredited by the Accreditation Council for Psychoanalytic Education, Inc.

This manual should be read carefully, as changes in policies, procedures, and forms are effective with its publication. Students are expected to be familiar with the Program’s requirements as delineated in the manual’s most recent edition. Manual revisions are dated and the current version, including regulations and forms, is available on the Program’s website. Please discard any previous manuals.

POSTDOCTORAL PROGRAM OVERVIEW

GOVERNANCE:

The NYU Postdoctoral Program in Psychotherapy and Psychoanalysis is a freestanding program within the Graduate School of Arts and Science (GSAS). The Program is administered by the Director, Lewis Aron, Ph.D. The Postdoctoral Clinic is administered by the Clinic Director, Spyros Orfanos, Ph.D., who reports to the Director.

The Postdoctoral Program Senate is the governing body of the Program and is responsible for Program policy and operations. The Senate is constituted of 26 senators with all segments of the Postdoctoral community represented. Chaired by the Director (who only votes to break a tie), the Senate consists of 13 faculty members (four from the Executive Committee, eight Track Chairs, and the Clinic Director); eight students; and five graduates, including one representing the Psychoanalytic Society (the society constituted of graduates of the Program).

The Postdoctoral Program's Executive Committee (EC) is an advisory committee to the Director. It consists of the Clinic Director and four faculty members, one from each of the Program's tracks. While the faculty members of the EC are selected by their tracks, their function on the EC is to consider the needs of the Program as a whole, rather than the interests of their respective tracks. The members of the EC also serve as liaisons between the Program and the tracks. The EC is responsible for making recommendations to the Director, who in turn makes recommendations to the Dean of the graduate school, for faculty appointments. The EC makes recommendations to the Senate regarding new courses and curriculum. In addition it advises the Director regarding program policy and operation of the Senate.

ETHICS:

The New York University Postdoctoral Program in Psychotherapy and Psychoanalysis has long enjoyed a reputation for professional, clinical, and educational excellence. This reputation is grounded in an ethical bedrock; it is expected that all students and faculty members will adhere to the highest ethical standards of the University and of the profession. The purpose of the New York University Code of Ethical Conduct is to highlight the essential elements of an ethical and responsible environment in which the central educational goals of the University can be met effectively and efficiently. The Code articulates ethical standards, principles, and policies that all NYU members -- at home and abroad -- are expected to uphold by incorporating these values into their daily University activities. For information on New York University's Code of Ethics and for further information on related policies and resources see, <http://www.nyu.edu/about/policies-guidelines-compliance/compliance/code-of-ethical-conduct.html>

Additionally, it is expected that all students will strictly adhere to the American

Psychological Association's (APA) Ethical Principles of Psychologists and Code of Conduct <http://www.apa.org/ethics/code/index.aspx> or to the equivalent code of ethics of the mental health discipline in which the student is licensed. The Postdoctoral Program's Ethics Advisory and Programming Committee offers education and programming related to ethical matters and concerns to the Postdoctoral faculty and candidates. Ethical dimensions and dilemmas that may arise in the course of all aspects of professional practice, including clinical consultation/supervision, treatment, and teaching, are considered.

All students are to familiarize themselves with the GSAS Policies and Procedures manual, which may be found at: <http://gsas.nyu.edu/page/policiesprocedures>

Procedures and Complaints:

New York University's GSAS has clearly stated policies and procedures for the handling of ethical matters (see above). Within the Postdoctoral Program, anyone in the community may bring a question or a complaint to the Program Director, the Clinic Director, or to any member of the Executive Committee, each of whom will use their best judgment in discussing the situation, maintaining the greatest possible confidentiality among themselves, as well as turning to the Ethics Advisory and Programming Committee for guidance. All attempts will be made to handle ethical matters informally as per the APA Ethics Code, which states, "When psychologists believe that there may have been an ethical violation by another psychologist, they attempt to resolve the issue by bringing it to the attention of that individual, if an informal resolution appears appropriate and the intervention does not violate any confidentiality rights that may be involved."

If for any reason anyone in the community does not want to bring such a complaint to the Directors or to Executive Committee members, they may proceed directly to one of the Associate Deans or to the Dean of GSAS. Thus there are a variety of people who can be turned to in the management of any question or complaint. All parties will follow GSAS policy and procedure for the handling of any such matters. As psychologists, we are bound to handle any and all ethical matters as required by NYS law and the APA Ethics Code. Nothing in the University policies and procedures contradicts or interferes with this responsibility.

Additional Ethical Guidelines and Clarifications:

Confidentiality:

Students are expected to adhere to the highest level of professionalism in all aspects of their practice. This includes strictly preserving the confidentiality of information concerning their patients (both current and former) in their use of clinical material in oral and written presentations. More specifically, when a student uses case material in

teaching, publishing, or any other form, he or she will disguise the identity of the patient, living or deceased, and obtain written consent. This is an ethical area with a certain degree of ambiguity. Where written consent cannot be obtained, students will use their best judgment to ensure confidentiality and respect for the patient's rights and privacy. These standards will also be maintained when presenting and discussing case material during classes, case conferences, and other educational activities. Finally, students will not discuss case material in social settings.

Impairment:

Students are expected to maintain as much awareness as is possible of any factors or conditions that may limit their own or a colleague's ability to perform their professional responsibilities. These include physical and/or psychological conditions that are actively interfering with the individual's clinical or educational functioning. If a student is concerned about the competency of a fellow candidate or a member of the Program's teaching or clinical consulting/supervising faculty, she or he is expected to intervene by informing the Program Director, the Clinic Director, or any member of the Program's Executive Committee. Impairment is of ethical concern when it affects clinical judgment or performance, or other aspects of learning, teaching, supervising, consulting, or clinical work.

Boundary Violations:

Postdoctoral students must avoid conflicts of interest and potential boundary violations and problematic dual relationships that expose clients, patients, or other students to harm or exploitation. Students must also abide by the highest standards of professional conduct in their clinical work and thus cannot ask out, date, or pursue sexual/romantic contact with any person who consults them in any clinical context, even if that clinical consultation has lasted for only a brief period of time.

Loss or Incapacitation of a Personal Analyst:

Students should be aware that the Program Director, the Clinic Director, and members of the Program's Executive Committee are all available to speak with them in regard to personal and professional concerns, including the loss or incapacitation of a personal analyst. Although the Program does not assign analysts to students, students should be aware that the Director does maintain a list of faculty who are willing to serve as analysts of students at reduced fees.

CURRICULUM:

The program affords candidates the opportunity to take courses from faculty representing major orientations in psychoanalytic theory and practice. We encourage students to take courses reflecting differing points of view and to have clinical

consultation/supervisory experiences with faculty of diverse approaches. The curricula are designed to encourage an intellectual community in which theoretical diversity and comparative study may thrive, and where greater clarity of conceptualization and integration in psychoanalytic thinking may be achieved. Areas of study include:

- History and Development of Psychoanalysis
- Clinical Case Seminars
- Clinical Treatment of Specific Disorders
- Study and Clinical Use of Dreams
- Comparative Psychoanalysis
- Psychoanalytic Theory and Technique
- Cultural, Political, and Spiritual Issues
- Gender and Sexuality
- Development and Life Span Issues
- Infancy and Psychoanalysis

Candidates must satisfactorily complete 36 points of coursework, chosen with the guidance of faculty from among the Program's diverse areas of study. **Enrollment for a minimum of 2 points per semester is required.** New students are required to register for a first-year introductory course; all other courses may be chosen from the Program's extensive list of course offerings.

Course Requirements and Leave of Absence:

Enrollment in a minimum of one 2-point course, or two 1-point courses, per semester is required. If for any reason a candidate cannot take a course it is her/his responsibility to notify the Postdoctoral office in writing and explain the reason for the break in registration. A copy of this communication will be placed in the candidate's file. The candidate should communicate with the Program each and every semester during which she/he is not registering for a course. The Program will only extend leave to a candidate for a maximum of four consecutive semesters. If a candidate has not taken a course in two years (four semesters), or has not maintained regular contact with the Program, then she/he will be dropped from the Program by the Director. Candidates are required to complete 36 credits of coursework in order to graduate.

Course Evaluations:

At the end of each semester, course instructors write a brief evaluation of each candidate's performance and candidates are graded on a pass/fail basis. A candidate may receive a failing grade on the basis of lack of attendance, lack of or inadequate participation, or lack of preparation, among other reasons. If a candidate fails a course the situation will be reviewed by the Progression and Advisement Committee, which is described below, under Progression and Advisement (p. 9). Candidates may

challenge a failed grade by asking for a review by the Program Director. A discussion will be held that constitutes a warning. Following this warning and an opportunity for correction and improvement, further action may be taken as described under Progression and Advisement. Candidates may always ask that the appropriate Dean or committee of the graduate school review such decisions. Candidates write an anonymous evaluation of each course instructor as well.

Instructors' evaluations are due within one month following the end of the semester and are placed in each candidate's file at the Postdoctoral office. Candidates are expected to review their files every year, since it is the candidate's responsibility to make sure all evaluations are in the file and to be familiar with and reflect upon whatever issues may be raised by course instructors.

Tuition and Expenses:

Postdoctoral students select courses in a pre-registration system that is administered by the Postdoctoral Program office. Once all students have been assigned their courses, they register online. Tuition and fees are set by the Graduate School of Arts and Science and may be found online through the Program's website. GSAS tuition and fees apply to the Postdoctoral Program.

CLINICAL REQUIREMENTS:

The details of clinical requirements are spelled out below (see pp. 12-22 of this Handbook), and this brief description is intended only as an introductory overview.

The Postdoctoral Program's clinical requirements must be met by treating patients seen under the auspices of our psychoanalytic Clinic. The candidate is required to treat two patients for 200 hours each, for a total clinical requirement of 400 hours. It is recommended, but not required, that candidates treat one male and one female patient. Each Clinic patient must be seen at a frequency of at least three sessions per week, for a minimum of 200 hours. Each session must take place on a different day of the week and must be at least 45 minutes in duration. With the approval of the clinical consultant and the Clinic Director, some portion of the analysis may be conducted using interactive audio-video communications or telephone. All work done with a Clinic patient as part of the candidate's Clinic case requirement must be discussed with a Postdoctoral Program clinical consultant.

Candidates are to begin work with a Clinic patient by the beginning of their second year in the Program, and they are to continue Clinic work until the 400-hour Clinic requirement is met. Any student who delays initiating clinical requirements beyond this time should write to the Clinic Director, copying the Postdoctoral Office, requesting an exemption. In performing the clinical requirement, students are expected to follow all guidelines outlined in this Postdoctoral Program Handbook, which is updated regularly. If the candidate has already made use of his/her four-year entitlement to low-fee

consultation before the Clinic requirement has been met, then private clinical consultations from a Postdoctoral Program clinical consultant must be sought until that requirement has been completed.

Each candidate is required to complete 160 hours of clinical consultation with four clinical consultants (or three clinical consultants with 80 hours of consultation with one of them). At the end of each year of consultation the consultant submits a written evaluation of the candidate's progress. The candidate reviews this evaluation with the clinical consultant and signs it before the report is submitted for inclusion in the candidate's file. The candidate may submit his/her own written report if there is disagreement with the consultant. It is the clinical consultant's responsibility to write the evaluation in a timely manner, but it is also the candidate's responsibility to make sure her/his file is complete.

PERSONAL ANALYSIS:

Candidates in the Program are required to complete 300 hours of personal psychoanalysis at a minimum of three sessions per week; each session must take place on a different day of the week and must be at least 45 minutes in duration. At the discretion of the Progression and Advisement Committee, some portion of this analysis may be conducted using interactive audio-video communications or telephone. This analysis must begin prior to initiating work with a training case provided by our Clinic, and it must be concurrent with at least one year of the treatment of the Clinic patient. The candidate's personal analyst must have had, at the commencement of the candidate's analysis, five years of experience following graduation from an analytic training program that has standards commensurate with our own. Moderate-cost psychoanalysis is made available to candidates by many members of our faculty. For further information regarding moderate-cost analysis, candidates may speak with the Program Director or the Clinic Director. Forms attesting to the fact that the candidate is in analysis are to be filled out by the candidate each year until the requirement has been met. (See also APPENDIX C—Selecting a Personal Psychoanalyst.)

PROGRESSION AND ADVISEMENT:

Candidates are monitored as they advance through the Program by the Progression and Advisement Committee, which seeks to address any needs of candidates that may arise throughout the course of training. The Committee is made up of twelve members of the faculty and works in close collaboration with the Program Director and the Clinic Director. Candidates are evaluated by faculty following completion of each course and by consultants following each clinical experience, and these reports become part of the candidate's file. The Committee, working in conjunction with the Director and the Clinic Director, will review the candidate's folder annually. The purpose of this review is to insure that all candidates are being followed throughout their training, and that all class and clinical consultant reports in the file are taken into consideration. It is the candidate's responsibility to make sure that her/his file is complete.

The Committee will specifically focus on those candidates who have notified the Postdoctoral Office for review to be considered for graduation. If the candidate anticipates fulfilling all course, analytic, and clinical consultation requirements (including 400 hours of Clinic patient work) by the end of the academic year, the candidate is to notify the Postdoctoral Office in writing no later than the end of September of her/his intention to graduate the following Spring. The candidate's file will be reviewed at this time, and, if appropriate, the name of the candidate will be submitted to the faculty for final approval. Graduates receive a certificate stating that they have completed the Postdoctoral Program in Psychotherapy and Psychoanalysis.

The Committee will discuss any ambiguous or controversial matters regarding a candidate's performance, and the Committee may consult with the Executive Committee, the Program Director, and the Clinic Director. The Committee will give specific feedback and due warning to any candidate whose evaluations are less than optimal and will make recommendations to help the candidate move forward in her/his education. The Committee may require that a candidate complete additional coursework, consultation, clinical experience, or personal analysis in order to fulfill the requirements of the Program. Following a warning, probationary period, and follow-up evaluation, the Committee reserves the right to recommend to the Director to dismiss or deny continued registration or graduation to any candidate who in the judgment of the Committee is determined to be unsuited for the Postdoctoral Program. A candidate has the right to appeal this decision to the Program Director and Executive Committee and may always ask that the appropriate Dean or committee of the graduate school review such a decision.

The Progression and Advisement Committee has the unique task of monitoring candidates throughout their progression in the program. This includes addressing requests for a Leave of Absence (candidates should notify the Committee in writing whenever they are not registering for a two-point course in a given semester, and leaves may be granted for a maximum of two years), and final review of the candidate's completion of the required 300 personal analytic hours, 400 hours of clinical work with two patients, 160 hours of clinical consultation/supervision, and 36 points of coursework.

Additionally, the Committee has established Advisement procedures, whereby they will meet with candidates individually who are entering their second and third years in the program. The purpose of this advisement is to help guide candidates through aspects of training such as picking a clinical consultant, selecting a personal analyst, and beginning analytic work with a patient while enrolling in the academic coursework. The process is intended to establish an avenue for candidates to seek information and address questions from a resource that is not affiliated with a single track, and to perhaps help them develop a cohort for their continuing support while in the Postdoctoral program.

It is expected that all candidates will strictly adhere to the American Psychological Association's (APA) Ethical Principles of Psychologists and Code of Conduct or to the equivalent code of ethics of the mental health discipline in which the candidate is licensed.

All candidates should be familiar with New York University's Graduate School of Arts and Sciences (GSAS) "Policies and Procedures Manual and Forms," which can be found at: <http://gsas.nyu/page/grad.pp.manual>

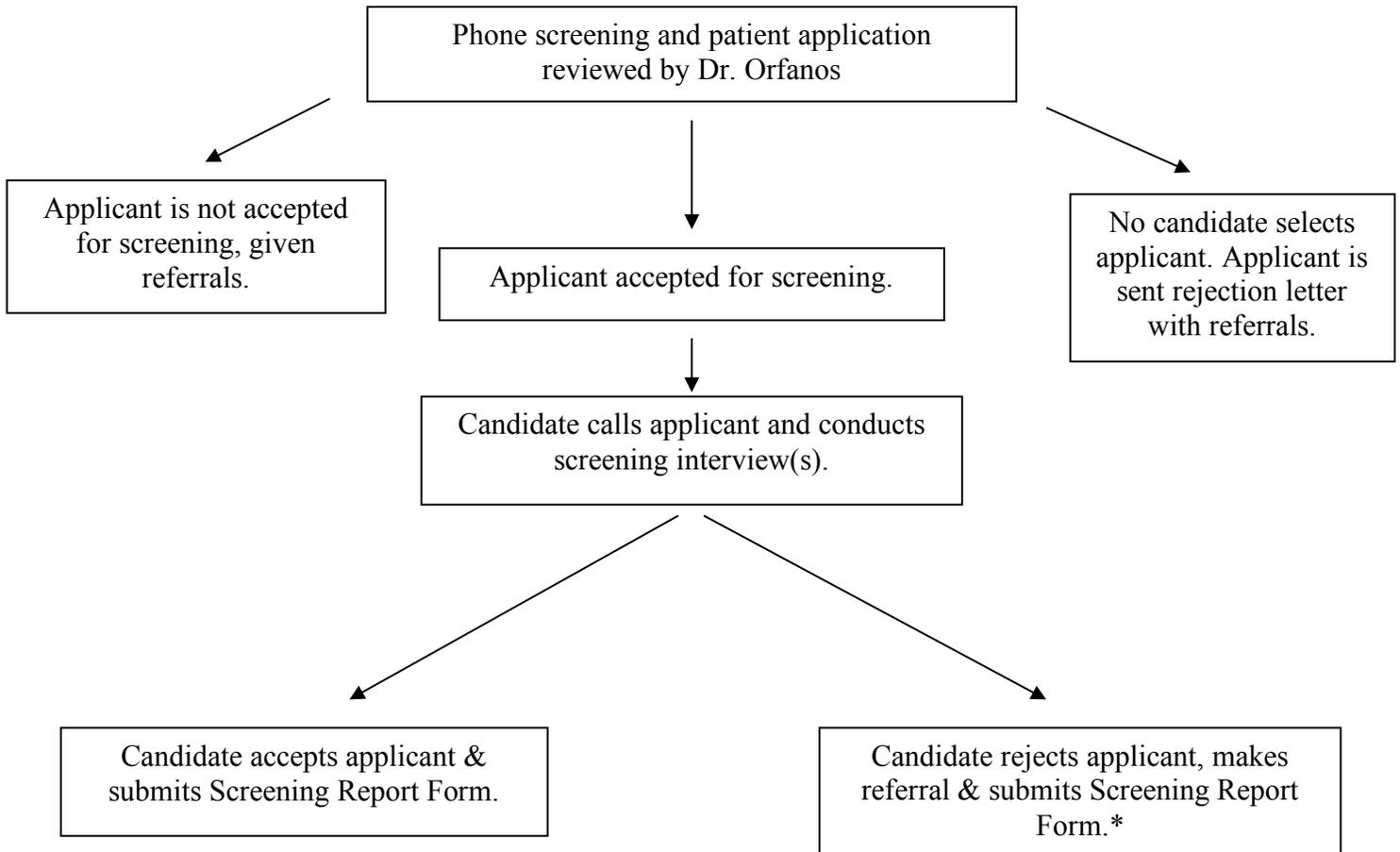
In the event of any academic, behavioral, or ethics complaint the rules of disciplinary procedure set forth in the GSAS manual will be followed. It should be clear that ethical violations would be pursued BOTH along professional lines as a violation of professional ethics AND as a failure of meeting the Program's academic requirements. As a violation of professional ethics the candidate may be reported to the State Department of Education, the Ethics office of the American Psychological Association, or to whatever relevant professional association the candidate belongs. As is always the case in regard to professional ethics, any licensed psychologist or mental health professional will report the violation of professional ethics according to the ethical requirements of the profession. In addition, any ethics or behavioral complaint will be considered as a violation of the Program's academic requirements and will be pursued along academic lines. Specifically, as stated in the GSAS manual (item #8.2.3.), the Director of the Program shall meet with the candidate against whom a complaint has been filed, describe the complaint, and offer the candidate an opportunity to respond. The candidate shall be informed of her or his right to accept or reject the Program's resolution. After considering all relevant information, the Director may inform the student of the terms, including (where appropriate) the imposition of sanctions upon which the Program is willing to resolve the matter. Where the candidate agrees in writing to the terms of the Program's resolution, a binding consensual resolution shall exist between GSAS and the candidate. Where the Director is unable to resolve the complaint by consensual resolution, the Director shall forward the complaint to the Associate Dean for Academic and Student Affairs.

INTRODUCTION TO THE POSTDOCTORAL CLINIC

Under the direction of Spyros D. Orfanos, Ph.D., ABPP, the Clinic is the treatment facility for the New York University Postdoctoral Program in Psychotherapy and Psychoanalysis. The priority of the Clinic is to offer clinical education aimed at enhancing the psychoanalytic practice skills of students. The clinic has been providing services to the public since 1961 through the provision of low-cost psychoanalysis and psychotherapy to individuals who can benefit from but could not otherwise afford such treatment. Clinic fees are arranged according to the patient's income. Candidates working with Clinic patients receive ongoing consultation with faculty from varied theoretical orientations who have been carefully selected for their clinical expertise. Clinical consultation emphasizes clinical excellence and ethical practice.

PROCEDURES ON PATIENT APPLICATION TO THE CLINIC

FLOW CHART



*Under certain circumstances, applicant may be referred to another candidate for screening.

I. CLINIC POLICIES

A. The Postdoctoral Clinic is sponsored by the University as a service to the public. Candidates providing psychoanalysis contribute to this very important public service.

B. Candidates are required to begin work with a Clinic patient no later than the beginning of their second year in the Program. New candidates in general may not work with Clinic patients until the middle of the first year of matriculation.

C. Candidates are required to begin their personal psychoanalysis prior to initiating work with a Clinic patient, and the analysis must be concurrent with at least one year of the treatment of the Clinic patient.

D. The Clinic Director must be notified six weeks in advance of beginning Clinic patient selection.

E. Only candidates licensed in their respective professions can see Clinic patients. Candidates must submit a copy of their license and malpractice insurance and must maintain updated records of such in their student files during the time period they are working on their clinical requirements.

F. Candidates will discuss the selection of patients with their clinical consultants and/or with the Clinic Director in order to obtain meaningful and diverse clinical experiences.

G. Clinic patients are to be seen a minimum of three sessions per week, in person, for 45 minutes per session. Each session must be held on a separate day. With the approval of the clinical consultant and the Clinic Director, some portion of the analysis may be conducted using interactive audio-video communications or telephone.

H. Prospective candidates are to be informed that the candidate is licensed in her/his profession, and that the candidate is in training as a psychoanalyst at the NYU Postdoctoral Program and is guided by our approved clinical consultants and faculty.

I. Prospective patients are to be informed that the initial screening interview usually requires two to three sessions, and that there is the possibility of a potential referral elsewhere. Patients may also have the option of meeting with a different candidate if one is available.

J. The candidate is required to treat two Clinic patients for a total of 200 hours each (this includes interview sessions). Students are expected to consult regularly on all Clinic cases. Candidates usually start with a second Clinic patient after they have completed the hourly and clinical requirements with the first Clinic patient.

K. In the event that work with a Clinic patient ends before the fulfillment of the minimum 200 hour requirement, the candidate may request in writing a waiver from the Clinic

Director, who makes a recommendation to the Progression and Advisement Committee. The request should state if the work completed has met the spirit of the training requirements. The Clinic Director considers a written recommendation from the clinical consultant and other supervisory reports in responding to this request.

L. Fees, fee setting, fee changes, disposition, etc., are considered an essential part of the training process and clinical consultants are to be informed by candidates of all plans in this regard. Fees are reviewed every six months in the context of the analytic process. Patients are informed of the ongoing process of fee review. Any changes in the contract (fees, etc.) are to be discussed with the clinical consultant and a brief written report should be submitted to the Clinic Director.

M. The candidate has the responsibility to see a patient through the completion of 200 hours of analysis and it is the Program's expectation that the candidate will continue to work with his/her Clinic patient beyond the 200 hours required for training purposes. This will take place in the candidate's private practice, and the fee will be paid directly to the candidate. The candidate is encouraged to continue with the same frequency and fee arrangement even after the Clinic requirement of 200 hours is met, but it is understood that there are circumstances in which this may not be possible. In such cases, the candidate aims to uphold a good and ethical analytic practice. The candidate is expected to continue the analysis through to a clinically appropriate termination, even if this occurs beyond the time of the student's graduation from the Program. At that time the analyst should obtain continued clinical consultation.

N. If the candidate is a psychologist, then she/he is expected to be thoroughly acquainted with and adhere to the latest edition of Ethical Standards of Psychologists (American Psychological Association), which is available at the Clinic. For example, Clinic patients are not to be terminated without serious consideration of their needs. Mental health practitioners from other disciplines (such as psychiatrists, social workers, psychiatric nurses) are expected to be thoroughly acquainted with and to adhere to the ethical standards of their respective professions (see section on Ethics, above). In the event of any academic, behavioral, or ethics complaint the rules of disciplinary procedure set forth in the above section on Progression and Advisement will be followed. It should be clear that ethical violations will be pursued BOTH along professional lines as a violation of professional ethics AND as a failure of meeting the Program's academic requirements.

O. The candidate will inform the Clinic patient if he/she has withdrawn from training, or if his/her status is otherwise changed before graduation.

P. Ethical and customary practice and professional regulations in New York State mandate that records of psychotherapy be maintained by practitioners. The Clinic follows all New York State Health Laws. Progress Notes are mandatory for all medical and non-medical mental health professionals. Progress Notes contain the name of the patient, session number, date, start time, end time, type of service. The body of each

note should include topics discussed in general terms; interventions; assessed efficacy; progress; salient symptoms; risk factors, if any; changes in diagnosis and/or plan; and actions taken. Progress Notes are not Psychotherapy or Process Notes. All notes are to be maintained in secure environments by the candidate.

Q. Those seeing Clinic patients outside of New York State are required to follow the regulations of their respective states.

II. CLINIC PROCEDURES

A. Selecting a Clinical Consultant

Prior to beginning screening interviews for a Clinic patient, candidates choose a clinical consultant. Selecting a clinical consultant is based on candidate learning needs and consultant availability. The Clinic Director and/or other faculty can assist candidates in the selection of a clinical consultant. The Clinic Director can provide a list of clinical consultants. (See also III, Clinical Consultants.)

Once a clinical consultant has been selected, the candidate must inform the Postdoctoral Office and the Clinic Director of the selection.

B. Selecting a Patient

1. Patient applications are on file at the Postdoctoral office. These applications have been pre-screened by the Clinic Director. This preliminary evaluation is based on certain gross criteria to eliminate those unlikely to benefit from our service and/or unlikely to be chosen by a candidate. These criteria may include: previous psychiatric hospitalization(s); continuous use of addictive drugs; serious past or present suicidal potential; severe psychosomatic disorders; notable history of interrupted treatments; no apparent areas of competent functioning; and any impediment or handicap that would prevent attendance at sessions.

2. Candidates should be sure to note what sort of person the applicant wishes to work with and the available times the applicant has listed before selecting an applicant to call for a screening interview.

3. Clinical consultants must be consulted before screening interviews are arranged to evaluate whether the applicant will be suitable for the candidate's training needs. The final decision whether to accept or reject an applicant takes place after discussion of the screening interview with the clinical consultant.

4. Under special circumstances a patient may be directly referred to a candidate. The Clinic application, however, must be submitted to the Clinic Director for approval before a screening appointment or a commitment is made.

5. On occasion, candidates choose to consider converting a private-practice patient into a Clinic patient. In such instances, the candidate and clinical consultant discuss in detail the pros and cons of such a change. The candidate also discusses the possible change with the patient. When a change is assessed as being in the best interest of the patient, then the potential Clinic patient is asked to speak with the Clinic Director and requests an application to the Clinic. Once approved, a Screening Report Form is submitted immediately by the candidate. See APPENDIX A.

C. Screening Interviews

1. It is important to make clear to the applicant at the first contact that the purpose of the interview(s) is to ascertain whether the particular offering of the Clinic and/or the particular candidate seems appropriate for the applicant.
2. The screening interview(s) provides an opportunity to obtain information beyond that offered on the application form, to get a sense of the suitability of the applicant for long-term intensive treatment, and to determine whether the candidate and the applicant can work together. More than one interview is often necessary before the candidate, clinical consultant, and applicant can come to a decision, but it is not advisable to hold more than three screening interviews.
3. It is essential that the interview(s) be discussed with the clinical consultant before any final decision is made to begin treatment.

D. Administrative Responsibilities

Please note: Required reports are to be filed in the Clinic office in a timely manner.

1. A completed patient application must be on file before a screening interview is arranged with an approved clinic applicant. Candidates are to ensure that the applicant's file contains the complete clinic application, including a consent form and record release form(s).
2. Once the applicant has been accepted as a clinic patient, only the administrative staff and the candidate have access to the file. Each patient's file can be obtained through the assistant to the Clinic Director.

E. Disposition

1. After the screening interview(s), the candidate has the following options:
 - a. The applicant is accepted for treatment by mutual consent.
 - b. The applicant is deemed inappropriate for the Clinic, and the candidate makes a suitable referral elsewhere, in consultation with the clinical consultant and/or the Clinic Director.
 - c. The applicant is not accepted for treatment by the initial interviewer, but a recommendation is made that a second candidate interview the applicant. Although the application may then remain in the active files for a maximum of two weeks, the candidate should be aware that it is unlikely that another candidate will take the case. If no other candidate interviews the applicant during the two weeks, it is the initial candidate's responsibility to arrange another appointment with the applicant to make a suitable referral elsewhere.

2. If the applicant is screened by a second candidate, then disposition becomes the latter's responsibility. If she/he does not accept the applicant for treatment, she/he should arrange for a suitable referral in consultation with the clinical consultant and/or the Clinic Director.

3. It should be made clear to any applicant who is rejected that the decision is not a rejection of the applicant's needs for treatment or potential to benefit from it but reflects the needs of both the candidate and the applicant.

4. A Screening Report Form must be filed for each applicant as soon as a disposition is made.

F. Fee Setting

1. Some financial information is given by the applicant on the application. There is no formula for soliciting additional information about the patient's financial resources; however, the following issues beyond income should be considered in establishing the fee: living arrangements, dependents, rent and utilities, transportation expenses, unusual expenses recently incurred or coming in the immediate future, work history and wages earned, savings accounts or trusts, debts, prospects for income changes.

2. After collecting additional information the candidate should consult with the clinical consultant to establish an appropriate fee, with a minimum of \$10, except under unusual circumstances. Fees are too often set inappropriately low. It is important to apprise the patient that fees are reviewed and adjusted at periodic intervals (e.g., every six months).

3. The Clinic has been designed to provide services for people with low incomes. During screening, patients whose incomes would allow for a fee higher than \$75 per session should be referred elsewhere.

4. If new information emerges after treatment has begun, the fee may be raised above \$75 per session; it should be revised appropriately upon consultation with the clinical consultant and with permission of the Clinic Director.

III. CLINICAL CONSULTANTS

A. Candidates are required to complete 160 hours of clinical consultation (four sequences of 40 hours each) with at least three consultants. The fee per consultation hour is currently \$50.00. The \$50 fee for clinical consultations is specifically for candidates working on their Program required clinical hours.

If the Director and Clinic Director determine that additional clinical consultations beyond the 160 required hours are necessary, the fee remains at \$50.00.

If a candidate chooses to continue consultation beyond the required 160 hours, the fee is to be negotiated with the consultant. It should be noted that there are many consultants who are willing to negotiate moderate fees, particularly when the work is continuing with a low-fee former clinic patient.

B. Following clinical consultation, the candidate has access to the clinical consultant's Evaluation, which becomes part of the candidate's file. It is the candidate's responsibility to inform the Clinic office if the report is not in her/his file.

IV. PATIENT BILLING AND PAYMENTS

A. Billing

1. Clinic patients are billed for sessions at the end of each month of therapy, using the Clinic's billing stationery.

2. If the clinic patient is covered by insurance and/or a third party, all bills, reimbursement forms, and correspondence are countersigned by the Clinic Director before submission to the third-party insurer (provided a signature is necessary).

B. Payments

1. It is the candidate's responsibility to collect money from the patient on a monthly basis and to submit a Monthly Record Sheet along with payment to the Clinic office in a timely fashion. There must be a Monthly Record Sheet submitted every month even if the patient has not paid her/his bill for that month or is on vacation.

2. The patient is to make out a check to "New York University" for the full amount of the bill. The candidate then mails the patient's check along with a Monthly Record Sheet to the Clinic. Each payment should correspond to the monthly record sheet with which it is submitted.

3. Any extraordinary delay in monthly payment should be explained in writing to the Clinic Director.

V. TERMINATION

A. Transfer to Private Practice

1. When the required 200-hour clinic requirement has been met a Termination Report Form is to be filed in the Clinic office. The termination report is due in the Postdoctoral office **WITHIN ONE WEEK OF TERMINATION**. The short Termination Report Form also may be used if the patient is continuing in the candidate's private practice upon completion of the clinic requirement.

B. Termination of Treatment

1. If the required 200-hour clinic requirement has been met and the patient terminates, a Termination Report Form is usually sufficient. If there are complicated circumstances about the decision to terminate, a more extensive report must be filed following the issues mentioned in #2 below.

2. If treatment is terminated before the 200-hour clinic requirement is met, a Termination Report Form with a complete Case Summary using the outline below is to be filed in the Clinic office:

- a. Description of patient (appearance, attitude, behavior)
- b. Reasons for seeking therapy
- c. Relevant history (include discussion of previous therapy)
- d. Important contents discussed
- e. Course of therapy (i.e., changes in the relationship between patient and therapist; changes in goals of both patient and therapist)
- f. Progress - what was and what was not achieved
- g. Satisfactions and dissatisfactions in working with the patient
- h. Reasons for termination

3. Completion of the Termination Report Form (and Case Summary as necessary) is a requirement for graduation.

4. Termination Report Forms and Case Summaries are due in the Postdoctoral office **WITHIN ONE WEEK OF TERMINATION**.

APPENDIX A

CONVERTING A PRIVATE PRACTICE PATIENT INTO A CLINIC PATIENT

Candidates seek to convert patients from their private practice into Clinic psychoanalytic patients for various reasons (patient need, meeting clinical requirement, fees, scheduling, etc.). Successful conversions require clarity and implementation. The priority is always the patient's needs followed by the candidate's needs.

1. Study the Clinic section of the Student Handbook located in the Members Only section of the Postdoc website. All Clinic policy and procedures apply to conversion cases.
2. If you are considering converting a private patient into a clinic patient, consult first with your clinical consultant. Clinical consultants must approve a conversion process.
3. Talk with your patient about the reasons you are suggesting the conversion. Speak clearly about what you consider psychoanalysis to be and why the patient should consider it.
4. Explain to the potential clinic patient that it is approximately a two-year commitment at a frequency of three to four sessions a week. Explain that they do not sign a contract and that they are free to change their minds. Fees are based on income and ability to pay. Privacy and confidentiality continue to be central as in private practice. Explain that you will be consulting with NYU faculty.
5. Describe the clerical changes involved. For example, the patient will be writing a monthly check payable to NYU and giving you the check to mail in.
6. When it is decided between the patient and the candidate (in consultation with the clinical consultant) that there will indeed be a conversion, the patient will phone the Clinic Director at 212-998-7925 (or email: sdo2012@nyu.edu). The Clinic Director will review what the patient understands and ask that an application be completed and enclosed with a \$20 non-refundable fee.
7. The applicant should note the candidate as the referring person and that she/he wishes to work with said candidate.
8. Following a review of the submitted application and approval the Clinic Director notifies both applicant and candidate.
9. The candidate submits a Screening Report Form, which gets reviewed by the Clinic Director. When all this has been achieved the applicant is formally converted to "patient status" at the Clinic.

Note: The literature on psychoanalytic training indicates that converting a private practice patient to a training patient is complex. It appears that a high percentage of such efforts fail over time leaving both patient and candidate feeling frustrated. This is the experience at NYU Postdoc also. Therefore, the clinical processes involved need to be reviewed carefully and considered in light of the complexities. **The process of conversation, however, can be an important learning experience somewhat akin to changing a private once-a-week patient to a multiple-times-a week patient.**

APPENDIX B – Sample Forms

Application Cover letter
Clinic Application
Record Release
Consent Form
Screening Report
Monthly Record Sheet
Billing Stationery
Termination Report
Clinical Consultant Evaluation
Rejection Letter



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NEW YORK, NY 10003
Telephone: (212) 998-7925
Facsimile: (212) 995-4370
E-Mail: sdo201@nyu.edu

SPYROS D. ORFANOS, PH.D., ABPP
Clinic Director

Dear

Enclosed please find the application you requested for treatment at the New York University Postdoctoral Clinic in Psychotherapy and Psychoanalysis.

The Clinic is an integral part of the NYU Postdoctoral Program in Psychotherapy and Psychoanalysis. It is a low-cost specialized service for adults interested in an intensive experience in psychoanalysis. Services are provided by postdoctoral psychotherapists who are guided by our approved clinical consultants and faculty. Patients are usually seen three times per week for two years. In some cases, patients are seen four times per week. Fees are based on a sliding scale determined by income and other relevant financial considerations.

For your application to be considered, all forms and the screening fee must be received. Please follow the instructions below:

1. Complete the four-page application in its entirety, and complete and sign the consent form.
2. Fill out the Record Release Form(s) with your doctor's name and address for any previous or ongoing medical treatment or psychotherapy. It may be necessary to submit a physician's report.
3. Enclose a check or money order for the \$20 screening fee made payable to NEW YORK UNIVERSITY. This fee is non-refundable.
4. Return all completed forms and the screening fee to: DR. SPYROS ORFANOS, CLINIC DIRECTOR, NYU POSTDOCTORAL PROGRAM, 240 GREENE STREET, ROOM 303, NY, NY 10003.

Upon receiving your application, it may take up to six weeks to process it. Since our facilities are limited, we cannot interview all who apply nor accept for treatment all who are interviewed. Those who are not accommodated and who cannot make other arrangements will be aided in finding other resources.

We wish to assure you that your application will receive the most careful consideration.

Sincerely,
Spyros D. Orfanos, Ph.D., ABPP
Director, Postdoctoral Clinic

NEW YORK UNIVERSITY
POSTDOCTORAL CLINIC

240 Greene Street, 3rd Floor
New York, NY 10003
212-998-7824

DO NOT WRITE
HERE

Case #:

Date Received:

APPLICATION FOR POSTDOCTORAL PSYCHOLOGY CLINIC
(Please print or type)

DATE: _____

NAME: _____

HOME ADDRESS,
ZIP: _____

CELL or HOME PHONE: _____

EMAIL: _____

DATE OF BIRTH: _____ AGE: _____ SEX: _____

RELATIONSHIP/MARITAL STATUS: _____

HAVE YOU APPLIED TO THIS CLINIC BEFORE? _____ IF YES,
WHEN? _____

BY WHOM WERE YOU
REFERRED? _____

IF CURRENTLY IN SCHOOL,
WHERE? _____

WHAT YEAR? _____
MAJOR? _____

UNDERGRADUATE SCHOOL: _____ DEGREE REC'D: _____
YEAR: _____

GRADUATE SCHOOL: _____ DEGREE REC'D: _____
YEAR: _____

CURRENTLY EMPLOYED? _____
WHERE? _____

BUSINESS
ADDRESS: _____

BUSINESS PHONE: _____

OCCUPATION TRAINED
FOR: _____

SPECIFY TIMES WHEN YOU **COULD NOT** SCHEDULE SESSIONS, WITH REASONS WHY:

PLEASE LIST ANY PAST, PRESENT, OR RECURRING MAJOR PHYSICAL ILLNESS, HOSPITALIZATIONS, AND SURGERY:

PLEASE LIST CURRENTLY PRESCRIBED MEDICATIONS INCLUDING DOSAGE:

PLEASE DESCRIBE CURRENT OR PAST SUBSTANCE ABUSE:

PLEASE LIST PREVIOUS PSYCHOTHERAPY, IF ANY. DESCRIBE WHY, WITH WHOM, WHAT DATES, TIMES PER WEEK, AND WHY TERMINATED:

PLEASE LIST PREVIOUS PSYCHIATRIC HOSPITALIZATIONS IF ANY. PROVIDE DESCRIPTION:

PLEASE INDICATE YOUR REASONS FOR SEEKING PSYCHOANALYSIS. ENDEAVOR TO CLARIFY WHY YOU FEEL THAT ***now*** IS THE TIME. PLEASE SPECIFY HOW URGENT YOUR NEED IS:

WHAT ARE THE AREAS IN YOUR LIFE THAT YOU FEEL ARE GOING WELL FOR YOU?

WHAT SORT OF PERSON WOULD YOU LIKE TO WORK WITH?

INCOME AND RESOURCES

PLEASE COMPLETE ALL OF THE FOLLOWING INFORMATION TO HELP US DETERMINE YOUR FINANCIAL ELIGIBILITY FOR PSYCHOANALYSIS IN OUR CLINIC.

1. YOUR GROSS WEEKLY INCOME \$ _____ NET WEEKLY INCOME \$ _____

2. SPOUSE'S/PARTNER'S GROSS WEEKLY INCOME \$ _____ SPOUSES/ PARTNER'S \$ _____

3. OTHER INCOME \$ _____

4. VALUE OF RESOURCES (Savings, property, investments, stocks, etc.)

5. PLEASE LIST THE NUMBER OF PERSONS WHO ARE FINANCIALLY DEPENDENT ON YOU AND THEIR RELATIONSHIP TO YOU (EXAMPLE: 2—son and daughter)

6. DO YOU RENT OR OWN YOUR OWN LIVING SPACE?

MONTHLY RENT OR MAINTENANCE \$ _____

7. PLEASE LIST THE TYPE AND AMOUNT OF ANY UNUSUAL DEBTS, EXPENSES AND/OR FINANCIAL OBLIGATIONS YOU (AND YOUR SPOUSE/PARTNER) HAVE, AND THE AMOUNT YOU PAY PER WEEK TOWARD THESE OBLIGATIONS.

8. HOW DO YOU PLAN TO PAY FOR SESSIONS? (CHECK AS MANY AS APPLY)

OWN INCOME

PARENTS' INCOME

SPOUSE'S/PARTNER'S INCOME

INSURANCE (SEE BELOW)

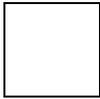
OWN INCOME & SPOUSE'S/PARTNER'S INCOME

OTHER (PLEASE SPECIFY)

DO YOU HAVE INSURANCE THAT COVERS PSYCHOLOGICAL SERVICES? YES NO

IF YES, WHAT IS THE AMOUNT AND TYPE OF
COVERAGE? _____

IF YOU HAVE INSURANCE BUT DO NOT WISH TO USE IT, PLEASE EXPLAIN:



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Postdoctoral Program in Psychotherapy and Psychoanalysis
240 GREENE STREET, THIRD FLOOR
NEW YORK, NY 10003
Telephone: (212) 998-7925
Facsimile: (212) 995-4370
E-Mail: sdo201@nyu.edu

SPYROS D. ORFANOS, PH.D., ABPP
Clinic Director

RECORD RELEASE FORM

Date: _____

To: _____
(Doctor, Clinic or Hospital)

(Address)

(City, State, Zip)

I hereby authorize you to release any and all information concerning my treatment

from _____ to _____

to Dr. Spyros D. Orfanos, Director, Postdoctoral Clinic, New York University, 240 Greene St,
Third Floor, New York, NY 10003.

Signature: _____

Name (print): _____

Witness: _____



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Facsimile: (212) 995-4370
E-Mail: sdo201@nyu.edu

SPYROS D. ORFANOS, PH.D., ABPP
Clinic Director

CONSENT FORM

I, _____, consent to Clinic psychoanalytic services with a candidate-in-training at the NYU Postdoctoral Program in Psychotherapy and Psychoanalysis. I understand that the NYU Postdoctoral Program serves educational and research purposes and that the postdoctoral professionals who render the services are required to be guided by approved clinical consultants and faculty of the Program. I further understand that these educational and research experiences require reporting of clinical data to clinical consultants and faculty, and give my permission for this to occur under conditions that will maintain privacy and the utmost confidentiality. In situations where a candidate is not available for psychoanalytic services, I understand that the Clinic Director will contact me with options available.

Applicant's Signature _____

Date: _____



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E-Mail: sdo201@nyu.edu

SPYROS D. ORFANOS, PH.D., ABPP
Clinic Director

SCREENING REPORT FORM

Date _____

Patient Name _____

Case # _____

Candidate Name _____

Clinical Consultant _____

Dates of Interviews _____

Fee per session _____

1. Referral Source _____

2. Has patient been accepted for psychoanalytic treatment?

3. Has patient been rejected for psychoanalytic treatment?

3.1 Reason:

3.2 Are you recommending that applicant be considered for second evaluation?

3.3 Reason:

3.4. Where has patient been referred (if applicable)?

Reviewed _____
Spyros D. Orfanos, Ph.D. ABPP

Date _____

NYU Postdoctoral Clinic

MONTHLY RECORD SHEET (Please Print)

Date:

Candidate:

Patient Name:

Case #:

Month of service:

Fee per session:

Dates of sessions:

Number of hours this month:

Total number of hours to date:

Amount paid this month:

Total amount paid to date:

Clinical consultant:

Total number of sessions with clinical consultant:

Notes (e.g. cancellations, change of fee, vacation, payment irregularities, etc.)

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NEW YORK, NY 10003

Spyros D. Orfanos, Ph.D., ABPP
Clinic Director

Name of Patient
Address

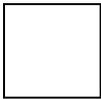
FOR PROFESSIONAL SERVICES:
SERVICES PROVIDED BY CANDIDATE:

DATES:

BALANCE DUE:

Candidate Signature
Clinic Tax #: 13-5562308

Please make check payable to New York University.



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Facsimile: (212) 995-4370
E-Mail: sdo201@nyu.edu

SPYROS D. ORFANOS, PH.D., ABPP
Clinic Director

TERMINATION REPORT FORM

Date _____

Patient's Name:

Candidate's Name:

Name of Clinical Consultant(s):

Date Therapy Began:

Date Therapy Terminated:

Total Number of Sessions:

Fee Per Session:

Reason for termination:

Where or to whom referred, including own practice (if applicable):

At What Frequency _____ At What Fee _____

If the patient has been transferred to the candidate's private practice, after the clinic requirement has been completed, and either the fee or frequency of sessions per week have been changed, describe and give reasons for these changes below and/or on the back of this form.

NEW YORK UNIVERSITY
POSTDOCTORAL PROGRAM
240 Greene Street, Third Floor
New York, N.Y. 10003
212-998-7890

CLINICAL CONSULTANT EVALUATION

CONSULTANT _____ Today's Date _____

CANDIDATE _____

Consultation began: _____ Consultation ended: _____ Total #
month/year month/year of hours: _____

This was candidate's 1st 2nd 3rd 4th consultative relationship.
(Circle one)

Describe major assets:

Describe major weaknesses:

(Over)

RECOMMENDATIONS: (e.g., additional consultation, additional coursework, further analysis, probation in program, drop from program, etc. Your recommendations should take into account the candidate's level of training.)

If the candidate's Clinic patient was transferred into the candidate's private practice during your work together, was there any change in fee and/or frequency of sessions?

Yes No

If yes, please describe the reasons.

CANDIDATE: I have read this evaluation. _____
Candidate's Signature

CONSULTANT: The candidate and I have gone over his/her annual Clinic case summary.

Yes No

Clinical Consultant's Signature



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Faculty of Arts & Science
Postdoctoral Program in Psychotherapy
and Psychoanalysis
715 BROADWAY, 1ST FLOOR
NEW YORK, NY 10003

Telephone: (212) 998-7925
Facsimile: (212) 995-4370

Spyros D. Orfanos, Ph.D., ABPP
Clinic Director

Dear

We have carefully reviewed your application to the Postdoctoral Clinic and we regret that we are unable to offer you psychoanalysis at this time. This decision is no reflection on your need for or ability to benefit from psychoanalysis.

As you may know, we receive many more applications than we have therapists available and thus are not able to accommodate everyone who applies for treatment.

If you would like our help in finding a therapist, please email me at sdo2013@nyu.edu.

Sincerely,

Spyros D. Orfanos, Ph.D., ABPP
Clinic Director

APPENDIX C

SELECTING A PERSONAL PSYCHOANALYST

Candidates at the NYU Postdoctoral Program are required to complete 300 hours of personal psychoanalysis at a frequency of three to five sessions per week; each session must take place on a different day of the week and must be at least 45 minutes in duration. At the discretion of the Progression and Advisement Committee, some portion of this analysis may be conducted using interactive audio-video communications or telephone. The analysis must begin prior to initiating work with a training case provided by our Clinic, and it must be concurrent with at least one year of the treatment of the Clinic patient. Selecting a psychoanalyst for this personal treatment is one of the most important choices a candidate will be required to make, in life as well as in psychoanalytic education. The analyst must have graduated from a psychoanalytic training program, and must have been practicing for at least five years after graduation, but she or he does not have to be a graduate of the NYU Postdoctoral Program; provided that the analyst's training meets the standard of the same three-to-five times per-week session frequency that we require, she or he can be acceptable to us.

Among the significant factors to consider in selecting a personal psychoanalyst are whether the individual is licensed, and his or her advanced education and specialty certification. For example, a psychologist who has earned certification in psychoanalysis by the American Board of Professional Psychology (ABPP) has demonstrated skill in psychoanalytic assessment and intervention, and is knowledgeable about the profession's ethics, literature, and research. Our Program and our community are committed to the highest standards of ethical conduct in training and in practice, and it is expected that candidates choose for their personal analysis clinicians who adhere to those same standards. Personal analysts must be in good ethical standing and must be covered by malpractice insurance. Candidates will be asked to attest to the active status of their personal analyst's malpractice insurance each year on the form in their files.

There is no one sure way to make an informed decision about the choice of a personal psychoanalyst. Many candidates start with recommendations. They seek the advice of mentors, supervisors, peers, and/or friends. Still others research online or read publications. Some begin by interviewing two or three potential analysts before deciding on one. It can, however, sometimes be unproductive if a candidate shops around too much. During consultations, it is usually useful to seek characteristics and interactions that feel workable, and to assess one's level of comfort. Be aware, though, that too much comfort may not allow the treatment to move forward, while too little comfort may prevent the treatment from getting underway.

Although the candidate's analyst does not have to be a graduate of the NYU Postdoctoral Program, we of course think highly of our own graduates and faculty, and candidates may well want to consider one of them. Many members of our faculty make moderate-cost psychoanalysis available to candidates. For further information regarding

moderate-cost analysis, candidates may speak with the Program Director or the Clinic Director.

The choice of a personal analyst has to take into account numerous therapeutic, professional, and practical factors. It should above all be tailored to the candidate's personal needs. Help is available for anyone who has questions or would like assistance with this process. Candidates should not hesitate to contact the Program Director, the Clinic Director, a member of the Executive Committee, one of the Heads of Tracks, or a member of the Progression and Advisory Committee for guidance.

ANNUAL PERSONAL ANALYSIS UPDATE

(Please Print)

Candidate name _____

Date entering Postdoc Program: Fall _____

Analysis since last update:

Name of Analyst _____

Highest Degree _____

Specify Board Certification if any _____

Analyst's Training Institute _____

Date graduated _____

Is your analyst's malpractice insurance current? YES _____ NO _____

Current frequency of sessions _____

Number of sessions at 3 or more sessions/week since last update _____

Notes:

Candidate Signature

Date